PERSONAL BUDGET WORKSHEET

Last Name		**Date**	
First Name		**Rank**	
Unit		**SSN - last four**	
Number in Family		**On/Off Post**	

Income		**Deductions**	
BASE PAY		FED TAX	
BAS		FICA - SOC SEC	
BAH		FICA - MEDICARE	
COLA		SGLI	
SPECIAL PAY		STATE TAXES	
FAMILY SEPERATION		AFRH	
SPOUSE INCOME		MEAL DEDUCTIONS	
		DENTAL	
		FAMILY SGLI	
		*ROTH TSP	
		*TRAD TSP	
Total Income (1)	$ 0.00	**Total Deductions (2)**	$ 0.00

Expenses		**Creditors**	**Payment**	**Balance**	**% or NSF Fee**
RENT / MORTGAGE		CAR PAYMENT			
WATER / ELECTRIC		CAR PAYMENT			
CELL PHONE		AER LOAN			
GROCERIES		OMNI			
OUT OF HOME FOOD		PIONEER			
FUEL / GAS		STAR CARD			
ENTERTAINMENT		CREDIT CARD 1			
INTERNET CABLE		CREDIT CARD 2			
CAR / RENTERS INS					
LIFE INSURANCE					
HAIRCUTS					
Total Expenses (3)	$ 0.00	**Creditor Totals (4)**	$ 0.00	$ 0.00	

1	$ 0.00	INCOME
2	$ 0.00	DEDUCTIONS
3	$ 0.00	EXPENSES
4	$ 0.00	DEBT
(1 - 2 - 3 - 4 = total)		

Surplus / (Deficit)	$ 0.00

RESET FORM